

**CLAIMS ONLY**

Application Number

10/804271

**Filing Date**

**Applicant(s)**

0/-02-07

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			/			
2				/		
3				/		
4				/		
5				/		
6				/		
7			/			
8				/		
9				/		
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49						
50						
Total Indep			4			
Total Depend			14			
Total Claims			18			

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						